

AMENDMENTS TO THE ABSTRACT

IN THE ABSTRACT:

Please replace the Abstract with the following rewritten paragraph:

Surgical methods and related medical devices for treating glaucoma are disclosed. One glaucoma treatment kit has an implant with outflow and inflow portions, and an applicator. The outflow portion is sized and shaped to be received within Schlemm's canal of an eye. The inflow portion is in fluid communication with the outflow portion, and is configured to be disposed in an anterior chamber of the eye. The applicator is configured to releasably hold the implant and to be introduced into the anterior chamber for implantation into eye tissue. A long axis of a flow path of the inflow portion is disposed generally transversely to a long axis of a flow path of the outflow portion when the implant is releasably held by the applicator. The method comprises trabecular bypass surgery, which involve bypassing diseased trabecular meshwork with the use of a seton implant. The seton implant is used to prevent a healing process known as filling in, which has a tendency to close surgically created openings in the trabecular meshwork. The surgical method and novel implant are addressed to the trabecular meshwork, which is a major site of resistance to outflow in glaucoma. In addition to bypassing the diseased trabecular meshwork at the level of the trabecular meshwork, existing outflow pathways are also used or restored. The seton implant is positioned through the trabecular meshwork so that an inlet end of the seton implant is exposed to the anterior chamber of the eye and an outlet end is positioned into fluid collection channels at about an exterior surface of the trabecular meshwork or up to the level of aqueous veins.